

COUNCIL ON MINORITY MENTAL HEALTH & HEALTH DISPARITIES

History:

Charge revised December 1984, name changed March 1999, changed back to National Affairs July 2000; restructured & renamed May 2002; charge revised November 2002.

Composition: There are 8 members of the council.

Charge:

The council has the responsibility for the representation of and advocacy for both minority and underserved populations and psychiatrists from minority and underrepresented groups. The council seeks to reduce mental health disparities in clinical services and research, which disproportionately affect women and minority populations. The council aims to increase awareness and understanding of cultural diversity* and to foster the development of attitudes, knowledge, and skills in the areas of cultural competence through consultation, education, and advocacy within both the APA and the field of psychiatry** and public policy. The council aims to promote the recruitment into the profession and into the APA and retention of psychiatrists from minority and underrepresented groups both within the profession and in the APA. *"Cultural diversity includes issues of race, sex, language, age, country of origin, sexual orientation, religious/spiritual beliefs, social class, and physical disability."

**Defined as "including in undergraduate and graduate medical education, in faculty development, in research, in psychiatric administration, and in clinical practice."
(Position Statement on Diversity, APA Document Reference No